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ABSTRACT

Sometimes called "halfway houses," the residential centers provide correctional services needed in the transition of selected offenders from prison terms to productive roles in society. Their task includes building solid ties between the offender and the community, integrating him into community life, restoring family ties, and obtaining employment and education. The success of a community residential center for offenders depends on careful planning and administration. This pamphlet describes the principles and details of the planning and operation of residential centers. Special attention is given to the importance of a careful definition of the purposes of a center before planning begins. (Author/BH)

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THE RESIDENTIAL CENTER:
Corrections In The Community

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PREFACE

Sporadic attempts to operate small community residences for offenders have been undertaken by religious and other humanitarian groups in this country for more than a century. Most of them have been dedicated to giving shelter and the bare necessities of life to the homeless ex-prisoner while he tries to reestablish himself in society. For that reason they have acquired the name of "halfway house."

More recently, and especially since the end of World War II, a more positive and dynamic role for community-based, small residential centers has been visualized in the fields of mental health and corrections. They are seen as a hopeful substitute for the large hospital or prison as well as a bridge back to the community. We now have enough experience to know that this is a sound concept for many, but not all, offenders.

Mistakes have been made and failures must be acknowledged. This publication is intended to assist those who plan such projects in the future to avoid the mistakes that others have made and thus reduce the risk of failure.

The most common error, probably, is to assume that an offender will be so grateful for the opportunity to remain in the community that he will automatically and immediately become productive, responsible and law-abiding. No such magic can be anticipated.

The success of a community residential center depends upon a carefully conceived program, resolutely and skillfully administered. Therefore, the following pages will be devoted to the principles and details of planning and operating community residential centers. Special attention will be given the importance of a careful definition of the purposes of a center before planning begins.

This pamphlet was produced by the staff of the Division of Community Services, Federal Bureau of Prisons. Major responsibility for writing and editing was borne by Mr. Gerald A. Collins, then Community Center Coordinator and Mr. Mark S. Richmond, Assistant Director, with minor revision by William Messersmith, Community Program Coordinator, before printing. Special thanks is due the program managers outside the Bureau of Prisons who so generously contributed their time and wisdom to a review of the manuscript. Their valuable suggestions have been incorporated in the text. It is hoped that this presentation will be useful to correctional workers, judges, citizen groups and others who have an interest in "halfway houses" and how they function.

NORMAN A. CARLSON

Director, U. S. Bureau of Prisons

INTRODUCTION

Wherever it may fit in the spectrum of correctional services, the residential center should provide a programmed and supervised transition to productive community living for selected offenders. The program should be as flexible as possible, geared specifically to case management* needs and directed toward each offender's achievement of progressive self-sufficiency in the community.

The rationale for residential centers. The conceptual framework for the residential center was clearly expressed by the Corrections Task Force of the President's Commission of Law Enforcement and Administration of Justice:

> "The general underlying premise for the new directions in corrections is that crime and delinquency are symptoms of failures and disorganization of the community as well as of individual offenders. In particular these failures are seen as depriving offenders of contact with the institutions (of society) that are basically responsible for assuring the development of law-abiding conduct...
>
> "The task of corrections therefore includes building or rebuilding solid ties between the offender and the community, integrating or reintegrating the offender into community life—restoring family ties, obtaining employment and education, securing in the larger sense a place for the offender in the routine functioning of society... This requires not only efforts directed toward changing the individual offender, which has been almost the exclusive focus of rehabilitation, but also mobilization and change of the community and its institutions."

Even assuming that an offender is positively motivated to learn new skills and to develop new social relationships, the job is only half done. He needs a linkage with the non-criminal world, and this is a problem which in most instances he cannot handle entirely by himself. Being an "ex-con" is a social role, not just a personal feeling. Therefore, the offender needs correctional experiences which can provide: (a) motivation for acquiring a conventional role in a non-delinquent setting; (b) realistic opportunities for testing this role; and (c) rewarding experiences which will tie him to the new role.

The real opportunities for successful reintegration of offenders to society lie in the community. There is a high priority need for correctional agencies to open the doors to resources which up to now have not always been open to offenders. This means more than formalized working relationships between correctional agencies and schools, universities, churches, business, organized

*This term is an improved substitute for "classification." Implying more than placing people into categories, the word "management" emphasizes the casework functions that are involved in goal-oriented diagnosis and program planning.

labor, civic and professional groups and individual citizens. What is needed is solid "bridge building" between correctional agencies and the community that will enable selected offenders to participate in work, training and other aspects of community life.

Residential centers past and present. The sources indicated in the appended bibliography trace the history of "halfway houses" to the latter half of the nineteenth century in Europe. One of the more significant proposals of that era was Crofton's "Irish System" which provided a graduated transition for offenders from maximum security confinement to supervision in the community. In the United States during the 1920's, a few halfway houses were known to exist briefly in Boston and other large cities until they succumbed to overpowering public and official resistance.

Similar services for offenders began to develop more rapidly after World War II. In 1946, officials of the Children's Bureau began discussing the desirability of establishing residential facilities for juvenile offenders, indicating that "a post-training school hostel would ease the transition from the institution to the community." It was not until fifteen years later that the Federal Bureau of Prisons initiated Pre-Release Guidance Centers to demonstrate the effectiveness of such a program for juvenile and youth offenders preparing for parole.

Meanwhile, a number of private organizations had begun to develop programs for offenders which provided residential services to offenders released from institutions on parole or at the end of their sentences.

New Jersey undertook a different approach. The famed Highfields Project was designed to provide residential and program services for youthful offenders prior to incarceration. Selected offenders were admitted to Highfields as a condition of probation and only those who failed in the program were returned to court for sentencing to an institution. Highfields became the prototype for a number of residential programs aimed at the management and control of young offenders in the community.

Soon after World War II a number of state and Federal correctional institutions began to experiment with intra-mural pre-release programs. Prisoners soon to be released were involved in discussions, led by staff or participants from the community, related to conventional ideas about employment, family relations, drinking and other significant problems. A few of the more sophisticated pre-release programs attempted to deal with fears, uncertainties and anticipated problems as the inmates themselves perceived them.

The difficulty with intra-mural programs of this kind appears to have been the impossibility of overcoming the real separation of the offender from the community to which he was bound. This meant that there was no oppor-

tunity to test the motivations and effects of counseling that the program was intended to produce.

For many inmates the lectures, discussions and small increase in privileges were a minor gain. These offenders, usually without family, lacking meaningful friendships, poorly trained and with little self-confidence found it difficult to obtain employment and residence that were often prerequisites for release on parole. Those completing a sentence saw only the barest chance of survival when their total assets were a small cash gratuity and a "dress-out" prison suit.

From among such persons the fledgling privately-sponsored "halfway houses" drew their clientele. The "halfway house" offered the one hope of release on a long overdue parole and it was at least a temporary shelter for the men who served full terms.

That the "halfway house" has been able to survive and develop into a highly useful correctional tool is a tribute to the pluck, perseverance and dedication of its early pioneers. "Halfway houses" usually were forced to locate in deteriorating sections of the community and often in the most deteriorated buildings because "respectable" people did not want "jail-birds" as neighbors. Usually supported, at least in part, by some religious organization and dependent upon donations for operating funds, the existence of these "houses" was precarious at best. They sometimes received scant and grudging support from correctional agencies simply because they were the only way out for some offenders.

Many privately operated "halfway houses" experienced even more critical problems. The basic need to define program and purpose usually was not adequately faced in the best of them and was not understood in the worst. In some, services were limited to a roof, a bed, and food. In others, well-meaning sponsors added employment help, financial assistance, sympathy and good advice. A few, better staffed and having more sophisticated knowledge of offenders, have been able to develop purposeful programs utilizing the combined skills and desires of the offender, the "house" staff, and the varied resources of the community.

In 1963, a group of staff people and others involved in the operation of "halfway houses" organized the International Halfway House Association. In the spring of 1968, the Association was accepted as an affiliate of the American Correctional Association. Its principal aims are to provide a forum for the exchange of information and to set standards which will improve the operation of "halfway houses" and contribute to program development. The Association regularly publishes a directory which lists approximately 200 facilities, other than those for alcoholics and the mentally ill, with capabilities of providing programs and services for offenders.

With the advent of funding by the Law Enforcement Assistance Administration, the number and type of facilities should increase rapidly.

PLANNING A RESIDENTIAL CENTER

The actual physical establishment of a residential center should not be undertaken until basic principles have been formulated, policies clearly defined and the initial operating procedures reduced to writing.

Any necessary legislation and careful, patient community preparation based on the principles, policies and procedures must take precedence over site-selection and necessary architectural and building operations. General public acceptance and some degree of public sharing in deciding these crucial issues is the first vital step.

BASIC PRINCIPLES

The experiences of residential center managers and correctional workers who have used this type of resource show that:

1. Residential centers function effectively only if their residents have ready access to the community's resources for aid in organizing an acceptable way of life. Foremost among these are job opportunities, programs of education and training, clinical and professional services and general public acceptance.

2. Residential centers should be used for those who need the particular kinds of help that centers can provide, but there must always be controls to safeguard the community and good judgment in the selection of participating residents.*

3. Exploitation or special favor to residents must be avoided. Residents should participate in authorized community activities on exactly the same basis as other members of the community.

4. Residents of a center who are still under sentence remain in technical custody and if a resident absconds, he should be treated as an escape.

5. Responsibility for making decisions with respect to admissions and removals of residents should be vested in the official of the agency who is accountable for the operation of the center. Whether the center is sponsored by a public or private agency, its staff will seek the closest possible collaboration with judges, correctional administrators and paroling authorities who may share responsibility for the proper and effective use of the center.

POLICY QUESTIONS

Prefabricated policies to fit every center in every situation would be disastrous. However, the following policy questions need to be raised and

Selection presents many complicating issues, some of which will be discussed in subsequent sections. Centers located near transferring institutions may include personal interviews with prospective residents as part of the selection process. Some centers require applicants with pathologies to agree in advance to participate in specializea treatment as a condition of acceptance.

answered as one important element in deciding whether a center should be established.

An assessment of the needs of offenders in the geographic area to be served by a proposed center should receive early consideration. Unless there can be general agreement by those concerned that (a) substantial needs exist and (b) a residential center program can be designed to meet a significant number of them, planning should stop at this point. Explorations might include:

- The number and kinds of offenders for whom controls, help and diagnostic services can be provided on either a residential or "out-patient" basis while awaiting court disposition. (A number of residential centers have developed the capability of accepting persons who are not security risks for study and observation prior to court disposition.)
- The number and kinds of offenders who might be accepted on a postponement of hearing looking toward a dismissal of the charges if the resident is satisfactorily established at the end of the postponed time.
- The number and kinds of offenders on probation who might be considered for admission because of manifest need for closer control and more concentrated assistance than can be offered through regular supervision.
- The number and kinds of offenders under short sentences who might be committed directly by local courts in lieu of commitment to jail and other correctional facilities.
- The number and kinds of longer-term sentenced prisoners who might be accepted by transfer from correctional institutions for special programming in the community prior to release.
- The number and kinds of offenders on parole who might be considered for admission because of demonstrated need for closer control and more concentrated supportive assistance than can be offered through regular supervision.

In communities of 100,000 or more population, it can reasonably be assumed that a single residential center will not be able to meet the needs of all potential residents. Planning to match programs and services to needs is largely a matter of choosing among many alternatives relating to the nature of the programs and services to be offered, availibility of resources and the degree of flexibility with which residents may be moved through the center. The capacity of a center is also related to the residents' average length of stay. Thus, a center having a 25-bed capacity with an average resident stay of 90 days would be able to provide for 100 persons a year. (It will be shown in a subsequent section that this number can be expanded by using a "live-out" procedure.)

1. *Target groups:* The number and kinds of offenders to be programmed through a residential center are the principal determinants of both the nature and level of programs.

The experience of the Federal Bureau of Prisons in operating community residential centers illustrates this. In 1961, three Pre-Release Guidance Centers were established. These were designed for selected juvenile and youthful male offenders who had been granted parole with effective dates set 90 to 120 days ahead. As the Centers were ready to receive them, the transferring institutions purchased their public transportation, dressed them in civilian clothes and sent them on the journey without escort. Upon arrival they began a regimen centered around employment and schooling or special training in the community, individual and group counseling at the Center, and medical, psychological or other professional help from the community as needed. Those who remained in the program for the predetermined length of time were moved on to parole supervision.

Under broader enabling legislation enacted by Congress and approved by the President in the fall of 1965, the Bureau of Prisons took advantage of the opportunity to examine closely the operation of the Pre-Release Guidance Centers, expand the scope of their functions, reestablish them as Community Treatment Centers, and open additional units in other metropolitan areas. While still concentrating on programming for younger offenders, the Centers were opened to adults. Selections are made now without reference to parole status on the basis of matching offender needs and Center capabilities, and the timing of the actual transfer is based on estimates of the length of stay that will be required to achieve predetermined goals for the individual.

In addition, the Community Treatment Centers are demonstrating the capabilities of receiving low risk offenders from the courts for study and observation prior to disposition, direct commitments of selected short-sentence prisoners, female offenders, plus probationers and parolees in need of stabiling experience without full violation proceedings. The Bureau of Prisons does not plan to multiply its Community Treatment Centers indefinitely. It will continue to experiment with different groups and methods, but as programs prove themselves, more emphasis will be placed on contracting for service with non-Federal public and private facilities. This prospect suggests that agencies wishing to take advantage of such contracts to supplement services to their own communities keep in mind certain general considerations which seem, to the Bureau, to make for success or failure.

A basic question for planners is: of all the offenders with problems and needs that are amenable to correction and control in the community, which can a particular center hope to provide effectively? Some are geared exclusively to juveniles and youths, some only to female offenders, some to misdemeanants only. Growing numbers of centers deal only with persons whose

confronting problem is drug addiction, alcoholism or mental retardation. A few, like those operated by the Bureau of Prisons, receive their clients from nearly all parts of the correctional spectrum and offer multiple programs to meet a specific range of needs. The selection of an operating model, then, will depend upon local demands, available resources, public interest in special categories and the working relationships that can be effected with other components of the criminal justice system.

2. *The location of a center*: Many "halfway houses" have been located in deteriorated facilities in deteriorating neighborhoods. Sometimes this has been defended by arguing that they should not be in neighborhoods that are "better" than those from which offenders come. At this time, there is no real evidence that this argument has validity.

It is important, however, that the facility be reasonably close to centers of business, industry and schools and accessible to public transportation. An expensive, tiring or complicated daily trip to and from the job can lower a resident's motivation, especially at the beginning of his adjustment to a new way of life.

The matter of leisure time resources demands very careful thought. It is hardly fair to the residents to locate them in skid-row districts or where there is known to be a high incidence of crime and delinquency. On the other hand, it is not very probable that many will find their recreation in museums, public libraries and high-priced cinema theaters. There are such places as respectable pool-rooms, bowling alleys and the like, and "building bridges" to these may be as essential as to banks, restaurants and social agencies of a more formal kind.

3. *Type of facility*: Because of the popular name "halfway house," some planners tend to look for a large old house which will provide a "family" environment. While such a facility may be acceptable, it probably tends to have more serious drawbacks than any other type. Usually such a building was constructed originally for family use and the plumbing, wiring and room layouts are quite inadequate for the heavy demands made upon them by the numbers of persons the center will need to accommodate. Often, various building and zoning codes will require substantial modifications of the structure. Such expenditures will divert scarce funds from greater needs.

The most serious fault with an old family dwelling, however, is the time required by staff and residents for cleaning, scouring and maintaining the house. Not only can this become an unnecessary source of friction between staff and residents, but time is stolen from the few hours available to staff for helping residents move toward self-sufficiency.

In recent years, organizations such as YMCA's and commercial hotels

have opened their facilities to residential center programming. In a number of instances housing, food services and various kinds of recreational activities have been included in the contract. The cost of these services is built into the center operating budget, together with the cost of necessary office space from which center staff functions.

The advantages of operating a center in this kind of setting are many. The staff, freed from responsibilities of supervising feeding, cleaning and general maintenance, can devote more time and energy to assisting the residents. Also, the center is able to operate with relative anonymity and it does not attract attention in ways which can be troublesome for an old house in a residential neighborhood. Centers housed in larger residential units usually are located close to excellent transportation services and the various community agencies to which residents need ready access. They also provide around-the-clock fire and safety watch.

There are some possibilities to guard against in the use of this kind of facility. The existence of a center within the larger facility requires conformity to the operating rules and general climate of that facility, but usually this can be achieved without serious difficulty or compromise. Recurring threat of incompatibility with the center's program is good reason for seeking a new location.

Recently it has been possible to operate residential centers in buildings especially selected for the purpose. Such facilities may be small hotels, motels or similar structures that originally were built for multiple residence. Generally, these combine the best features of location within a larger facility and the family type house. Typically, they are located near transportation terminals, restaurants, major traffic arteries and have easy access to the community resources the program requires. Problems of cleaning and maintenance that can be so troublesome in the older house are considerably lessened, while the sometimes annoying and negative aspects of operation within a larger facility are avoided completely. Moreover, such buildings usually are already zoned and approved for the kind of occupancy characteristic of a residential center.

4. *Sponsorship:* In the spectrum of correctional services, community residential centers occupy a position somewhere between institutionalization and supervision in the community under probation or parole. From the standpoint of case management, they furnish a limited resource for program and control. Despite differing views, it probably matters little whether the management of a center falls under the sponsorship of a public or private agency or, in fact, becomes part of the responsibilities of a probation, parole or correctional institution administrator. Of far greater importance are the quality of programs offered, the competence and integrity of the center's

staff and the working relationships between the center and the correctional agencies that use the resource. In current practice, there are a number of jurisdictions in which correctional agencies are given access to residential centers either by direct statutory authority or by enabling legislation which permits purchase of these services on a contractual or reimbursable basis. There are also examples of successful collaborative operation involving more than one agency or jurisdiction. In these situations, there may be a joint contribution to staffing or other means of sharing operating costs.

5. *Staffing*: Essential to the operation of any program dealing with people in need of help is the selection of staff qualified by training and temperament to meet those needs. The number and kinds of staff needed for the effective management of a residential center depends on its defined purpose.

Some privately operated "halfway houses," for example, admit as residents only former offenders who come voluntarily after their sentences have expired or as part of a parole plan. Their purpose may be no more than to give such persons temporary housing and minimum control over their coming and going. Staff requirements for such an operation are minimal, too. So long as the residents pay their assessments, they may move about more or less as they please, providing they cause no disturbance within the House and do not grossly violate the rules.

By contrast, other residential centers, such as those operated by the Bureau of Prisons, deal with a greater variety of offenders, most of whom are still serving sentences. They require 24-hour control. Staff requirements for this kind of operation are many times greater than for one with lesser responsibilities.

While adequate staffing depends upon the nature and extent of center programs and services, as well as the number of residents to be provided for, the following list of special functions will provide some alternatives for the planner:

Director—an administrator whose full-time responsibilities are the development and maintenance of a consistent program, together with management responsibility for the entire operation.

Counselors (1 or 2)—persons who deal directly with the residents in helping them find solutions to the problems each of them face daily.

Students—who work part-time and provide special counseling and theraputic services (usually under supervision), and share responsibilities for general supervision of residents.

Clerical Staff—either full-time or part-time, as the needs of the facility dictate. (Usually there are correspondence and reports to be typed,

funds to be received, disbursed and accounted for, along with other business functions to be handled.)

Specialists—Psychologists, psychiatrists, doctors and others who have special skills may serve on an as-needed basis, although it is usually preferable to obtain these skills through referral to a resource in the community.

Resource Developer—In some center programs, such a person functions as an Employment Placement Specialist, but his role can easily be expanded to include enlisting the help of all community resources which can be used by residents. In addition, he may function as the center's community relations representative. These are specialized functions, of course, which may be divided among other staff members or included among the responsibilities of the Director.

Whenever possible, residential centers should be staffed by paid employees whose primary responsibility is to the center. Experience suggests a rule of thumb that there should never be less than one full-time paid employee with management responsibilities.

6. *Funding:* As with staffing, the costs of operating a residential center will depend upon many factors. Foremost among them, of course, are the nature and extent of center programs and services, as well as the number of residents to be provided for. In addition, operating costs are influenced both by the average length of stay of the residents and the kinds of contractual and other arrangements that exist with participating agencies. There are so many possible variables that generalizations are impossible, but to illustrate some of the issues, two actual budgets are presented.

The first is the current annual operating budget of a privately operated residential center. It has been in existence approximately two years. The program plans an average stay of between three and four months. Residents are selected from among adult male parolees, generally between the ages of 20 and 35. A few residents are accepted while still under sentence. The rated capacity is 15 and the staff complement is 5 full-time employees (Director, Assistant Director, 2 Night Counselors, and Cook) and 4 part-time contractual specialists (Psychiatrist, Psychologist, Social Worker, Assistant Cook).

PRIVATELY OPERATED CENTER

(OPERATING BUDGET)

Personnel		$48,304
Full-time salaries	$41,934	
Fringe benefits	6,370	
Contract services		7,800
Travel		2,400
Space costs and rental		7,500
Utilities	1,200	
House rental	6,300	
Consumable supplies		960
Equipment, rent and lease purchase		3,300
Other		7,855
Food (14 residents plus 3 staff @ $1.00 per day)	6,205	
Telephone	600	
Maintenance and repair	600	
Accounting	300	
Insurance	150	
TOTAL COST		$78,119

The second is the budget for a residential center operated by a correctional agency within a larger facility. It, too, has been in existence approximately two years. The program anticipates an average stay of about 85 days. This center has the capablility of providing services to both male and female residents above the age of 17. Intake is from the courts for study and observation prior to disposition or by direct commitment under sentence; from correctional institutions by transfer of sentenced prisoners; and from paroling authorities both before and after parole revocation. Experimentally, the staff is providing limited casework services to local probationers on an "outpatient" basis. The rated capacity is 25 and the staff complement is 4 full-time employees (Director, Senior Caseworker, Junior Caseworker, Administrative Aide) and 4 part-time employees (Student Assistants). A full-time Employment Specialist and Counselor is paid from separate funds.

CORRECTIONAL AGENCY CENTER

(OPERATING BUDGET)

Salaries and personnel benefits	$68,404
Room rent—male @ $160/week	8,320
—female @ $90/week	4,680
Office rent	3,600
Travel	1,280
Telephone	1,080
Medical and psychiatric services (contractual)	4,000
Food (meal tickets at nearby restaurants)	3,600
Clerical supplies	500
Equipment, maintenance and replacement	300
Contingency fund	1,000
TOTAL OPERATING COSTS	$97,264
Salary and expenses of Employment Specialist	10,380
Annual gratuity fund	3,000
GRAND TOTAL	$110,644

The gratuity fund permits small cash grants to newly admitted residents to cover miscellaneous personal expenses until the first paycheck is received.

The acid test of funding a program, however, is the dollar outlay per resident in relation to results achieved. As strange as it may seem at first glance, it costs more per resident at the privately operated center previously described than at the center operated by the correctional agency. Granted that there are many differences between the two, the actual daily per capita cost of the private center is about $15 if it operates at full capacity all of the time. Thus, if the average length of stay is 90 days, the total investment per resident amounts to an average of $1,350. In contrast, the total daily per capita cost at the correctional agency center, including use of separate funds, is about $12. With an average length of stay of 85 days, at full capacity, the total average investment per resident is $1,020.

The importance of this, for planners and program managers alike, is

that a number of ways can be found, without sacrifice of program quality, to stretch the budgeted dollar. For example:

a. Qualified students can be recruited to perform counseling, case-work, testing and other functions. A number of centers have established relationships with nearby colleges and universities which have produced practicum students on a part-time basis. Since these students earn academic credit for the experience they gain, it usually is not necessary for the agency to pay them a salary. A number of centers make use of volunteers.

b. Nearby restaurants and cafeterias can furnish adequate meals at substantially less cost to the center than can be provided in-house, especially if there is a policy of providing meals only to those residents who are unable to purchase their own from salaries and wages. Large savings are seen in costs of food and supplies, kitchen equipment and food service staff that are not needed. In the examples above, note that food costs alone for 14 residents and 3 staff at the private center were budgeted at $6,205, whereas the food budget at the correctional agency center for 25 residents was $3,600.

c. Residents can be charged for their keep, and they usually are. In current practice, the amounts range between twelve and thirty dollars per week. Many privately operated centers are able to retain and reallocate these funds, but usually, public agency centers, which operate with appropriated money, must turn them over to the treasury of the unit of government. Nevertheless, the net cost to the taxpayer for the operation of the center is reduced.

d. The average length of stay can be reduced. In the examples given it would be most difficult to find a significant difference in effectiveness to the average resident of 90 days as compared to 85. The cost difference to the private center would be $75 per resident. There are policy reasons for making the length of stay as flexible as possible and to gear this to the program and service needs of the resident. Bureau of Prisons' centers are operated on this basis and, at present, the average length of stay has been reduced to 72 days. In this connection, an important fact is that when centers are utilized at less than capacity, per capita costs increase dramatically.

e. The actual center population can be made to exceed bed capacity. Some offenders can be handled effectively on an "out-patient" basis. This procedure reduces per capita costs as dramatically as underuse of the facility increases them. The program reasons for this procedure will be discussed in subsequent sections.

From the foregoing, it is clear that there are many things to be considered in preparing a center operating budget and that, whatever the options, the

costs are substantial. These can be fully justified only when it can be demonstrated that benefits to the offender are worth the investment.

7. *Community organization:* While it is true that a residential center becomes part of the correctional system from the moment it receives its first client, it is equally true that the center remains part of the neighborhood and community in which it exists. In no circumstance should a residential center be initiated until there is assurance that the local community has been adequately prepared for it. Planners and program managers should first promote public understanding and support for the new venture. This is a matter of developing and maintaining communications networks for the purpose of imparting basic information, interpreting the aims of the program and explaining its relationship to the total process of controlling and correcting offenders.

This public information should include:

a. Information to court, law enforcement and government officials: Support of the program, at least in principle, is required of the units representing the administration of justice and those components of the executive branch of local government that will be involved. This also applies to the neighborhood in which the center is to be located.

b. Use of community leadership: In any community there are particular individuals and organizations that are the major molders of public opinion. These may be found in business, in labor unions, among the clergy, in the legal profession, the news media and in a variety of civic organizations. Discussions, similar to those held with government officials, should be planned with the leaders of these groups.

c. Use of citizen advisory committees: An advisory committee composed of persons representing local community leadership can be an effective structure for utilizing this leadership. While such a group would not have administrative or management responsibilities, it may be an effective instrument of two-way communication as well as a sounding board for policy and program development. Members of such committees need to become actively involved beyond attending occasional meetings. Some may be prospective employers who can share responsibility for such functions as job development. Others may use their affiliations in other ways. In some localities, groups having an interest in corrections already exist and can help fill the role of citizen advisory committee.

8. *Policy formulation:* The planning group, administrator or program manager responsible for activating a residential center should, as part of preliminary planning, develop a complete operating plan. In effect, this will be a detailed statement of operating policies and procedures.

The principles already identified, along with others that may be appropriate to particular situations, should be translated into definitive policy statements. The exact manner by which the program is to be implemented and administered must be fully outlined. Beginning with a statement of the purposes of the center, attention should be given such matters as: selection of residents, how, when and for how long they will arrive, housing, disposition and control of earnings, supportive services to be provided, records and reports. Staff assignments and responsibilities must be defined also.

The importance of advance detailed planning is essential. A successful program depends upon the concerted, cooperative responsibilities and acts of many persons in diverse occupations and roles, both public and private. Such a joint undertaking cannot be "played by ear," but must have specific guidelines for all who are participants in the venture.

OPERATING A CENTER

It is the job of the program manager to implement policy decisions in which he may or may not have participated. He starts by developing a program outline. In order that the magnitude of this process may be seen in some detail, an actual policy statement and matching program outline are presented.

POLICY STATEMENT

Policy. The _____ Center is established to provide a programmed and supervised transition to productive community living for selected offenders who are to live within a 25-mile radius of the Center. The program will be as flexible as possible, geared specifically to case management needs and directed toward the achievement of each resident's progressive self-sufficiency in the community. The Center will provide multiple services (both from its own resources and through the use of existing community resources) to a maximum daily resident population of 25 individuals. Post-release, pre-commitment, study and observation and short-term commitment services will be provided, as needed, within the limits of the Center's capabilities. The Center will also have the capability of managing a work release program of significant proportions.

Case Selection. Offenders who are to live within the Center service area shall be given priority. Others may be considered as sound case management may dictate and with prior approval of participating agencies.

1. Types of offenders: Center intake will be limited to adult and youthful male offenders within the general age limits of 20 to 35 who can be expected to benefit from Center programs and services. While juvenile delinquents generally will be excluded, those who are in their nineteenth year may be considered on the basis of their need for Center services and their relative maturity.

2. Status of residents: Intake will be limited to sentenced prisoners and persons committed by the courts for study and observation prior to final disposition. All release categories are appropriate for transfer to the Center from a regular correctional institution. Usually, Parole Board action will be taken prior to transfer. Any resident who absconds shall be reported as an escape.

3. Identification of needs: Center programs are intended to be problem-oriented. Therefore, admissions may be considered on the basis of case management needs when eligible offenders are otherwise suitable. For purposes of accounting and program evaluations, full case records and reports for each offender will be furnished the Center with the referral and will identify the precise program and service needs.

4. Length of stay: This will be determined by Center staff in accordance with statutory requirements, Parole Board action and each resident's adaptation to program. Length of stay will be anticipated by the referring agency at time of referral.

NOTE: In order that the Center may provide and schedule the services needed, case selection shall relate an anticipated minimum length of stay to case management needs as follows:

Work release employment placement only	30 days
Work release to accumulate savings	90 days
Pre-parole and pre-release testing in the community	90 days
Marital and family counseling	30-60 days
Vocational and special training	Open
After-care treatment for alcoholism	60 days
After-care treatment for drug addiction	90 days

Usually, prospective Center residents will need more than one service. In such cases, the higher minimum length of stay shall apply. Since service needs thus determine the arrival dates of Center residents, case management planning, both at referring agencies and the Center, must be coordinated closely.

Living Arrangements. Consistent with the mission of the Center, the greatest possible amount of each resident's activity will be in the community. Accordingly:

1. The Center will not provide food service. Meals will be taken in the community, although residents may be permitted to prepare their own snacks, lunches and occasional hot plate-type breakfasts and dinners.

2. Except for radio, television and table games, recreation will be found in the community.

Use of Community Resources. Center staff will make heavy use of community resources for specific needs in individual cases. These include Parole Officers for residents who are to be released to supervision. Other community agencies, such as Alcoholics Anonymous, the Metropolitan Council on Alcoholism, Family Services, Vocational Rehabilitation, the Mid-Town Clinic, the Adult Division of the Board of Education and the State Employment Service, are available to those residents who have particular need for specialized services.

PROGRAM OUTLINE

Following will be the primary program elements of the Center with their approximate time requirements and case-load standards.

Employment Placement.

1. Job development: Quality employment opportunities will be generated by personal contact with prospective employers, a liaison with community placement services and development of related supportive resources.

2. Job placement: Placement consists of matching prospective jobs to inmate needs, guidance interviews and job applications, examinations, interviews, referrals and role-playing.

3. Placement follow-up: Placement follow-up consists of counseling interviews, job-site visits and other contact with employers. An average of one-half hour per week will be spent with each resident during his first month on the job. Counseling interviews and employer contacts thereafter will be less frequent and on an as-needed basis.

Counseling.

1. Related to employment and training: Responsibility will be shared by all counseling staff.

2. Related to family problems: This kind of problem-centered counseling may cover a wide range of marital and family situations. A combination of group and individual techniques will be used as indicated. Referrals to Family Services will be made as indicated and group sessions may be scheduled to involve all members of the family.

3. Related to drug addiction: To be handled on an individual basis and referral to the proper agency as indicated.

4. Related to alcoholism: To be handled on both an individual and group basis for residents who have manifested a drinking problem in the past and who have demonstrated the need for intervention while at the Center. Referrals may be made to AA and to Metropolitan Council on Alcoholism for regular psychotherapy and a regimen of Anta-Buse.

5. Related to Center and community adjustment: When inappropriate behavior is observed or reported, whether at the Center or in the community, a combination of individual and group techniques will be used as indicated.

6. Related to parole supervision: To be handled on both an individual and group basis as indicated. The District Parole Officer will spend about four hours per week at the Center to provide residents information relating to supervision rules and expectations and to discuss anticipated problems incident to the transition to parole supervision.

Residence Placement.

1. Development: A staff member, usually a Counselor, will be delegated responsibility to provide outside residence liaison. The purpose is to help residents up-grade their places of abode (those who are permitted to establish their own residence under the "live-out" procedure, as well as those who will need to establish themselves at time of release). By helping residents find suitable homes, they can avoid the high risk areas of the city which potentially will contribute to further delinquency.

2. Planning and placement: The Caseworker will be responsible for formulating and effecting release plans in cooperation with the Parole Officer. Conferences with family members, if a stable home environment exists, may be conducted at the Center or in the home. When independent placements are to be made, residents will be assisted in their search for a suitable residence. There will be close collaboration with the staff member designated for residence liaison in such cases and with the District Parole Officer for persons being released under supervision.

3. Residence follow-up: The residence liaison person will have primary responsibility for visiting residents on "live-out" status to insure that they are meeting their obligations to the Center and to the community.

Furloughs. By staff committee decision, furloughs may be granted for the following purposes:

1. To visit and assist in family emergencies, such as critical illness or death of a member of the immediate family.

2. To interview prospective employers.

3. To participate in special courses of training of 30 calendar days or less, when commuting is not feasible.

4. To participate in selected community religious, educational, social, civic and recreational activities, when it is determined that participation will reinforce the achievement of goals set for the resident.

5. To aid the offender in maintaining and strengthening family ties.

All furloughs shall be granted within the general limits of established policy and at no cost to the Center. They are not to be granted as rewards or because a resident may be "technically" eligible. Non-emergency and non-

training furloughs may be granted, not to exceed one week. These are intended, primarily as opportunities for residents to test their abilities and readiness for broader participation in the life of the community.*

"Live-out." The "live-out" procedure is a specialized kind of furlough. It has the same general purpose as non-emergency furlough with the added advantage of being a continuous transition to release from the Center. Usually, during the latter part of their stay at the Center, selected residents may be authorized by staff committee decision to "live-out." This may be at home, when family ties are intact, or in suitable independent quarters. "Live-out" residents shall maintain daily contact with the Center by telephone and report in person as required at least twice weekly. In addition, they are to be supervised by the Center's liaison person, as indicated in the preceding section.

COMMENTS ON PROGRAM ELEMENTS

As planners and program managers become involved in the daily pressures of operating the facility, there is a tendency to turn major attention to things that can be easily managed within the project itself—things that are characteristic of institution programs. It is hard to resist the temptation to give attention to recreation, attempts at personality restructuring, guided group interaction, curfew, clean floors and orderly routine.

The proper focus of attention, on the part of staff and residents, must be on building up the resources necessary for a self-sufficient life free of daily *management* by someone other than one's self. These resources include a job, a decent place to live, competence in money-management, and mutually satisfying relationships with other people. The sense of worth and personal integrity that comes with meeting one's obligations in all facets of life is the ultimate goal of rehabilitation, and it cannot be reached while others take responsibility for one's behavior. Therefore, the main thrust of a residential center must be outward, not inward. The center cannot protect the resident from "the slings and arrows of outrageous fortune." It can only open up situations in which he can test his resolution and expectations and offer him support and encouragement when the going gets tough.

To illustrate: The typical correctional institution controls the times at which an offender sleeps, awakes, eats, works and plays. The inmate becomes accustomed to responding to direct commands or written instructions and is likely to have acquired the "when in doubt, do nothing" reaction. If, after ar-

*There is not universal agreement with this position. Some center managers see nothing wrong with furloughs as rewards in the belief that furloughs are an effective motivational device.

rival at the center, he finds no comparable regimen, he may attempt to create similar controls, rebel against their absence or respond by doing nothing. Little can be gained by creating the control structure he seeks, because this type of control is not provided in the free community.

To carry the illustration further, center residents may be inclined to depend on staff to awaken them and send them to work. Staff members may be equally inclined to view this as a legitimate service, but who will provide the service in a few weeks when he leaves the center? To what purpose is this kind of assistance incorporated into the program? Would it not be far better to encourage each resident to buy an alarm clock like his civilian counterpart who also has to get to his job on time, and regularly?

In all areas of internal program, emphasis should be given each resident's involvement in his own plan. He must be motivated to develop it and carry it through, which also means that he must plan a major role in forming this important goal in his life. If he has family, their needs and wishes must be considered also. Staff involvement should be restricted, whenever possible, to guidance and clarification of alternatives. This may be difficult, but it is imperative that the resident develop his own skills in handling his affairs.

As the resident begins to function in the center program, the staff must constantly evaluate his progress toward the goals established and must be prepared to suggest new directions and new goals as they become more familiar with the resident and his needs. Staff members should concentrate on strategies for thrusting the resident into increasingly demanding situations of the kind he will encounter when he is entirely on his own.

Employment Placement. The methods used by the staff in job placement and follow-up can be effective and consistent with the mission of the center or they can be detrimental to the program and to the residents. Finding a job for a man may appear to solve an immediate problem, but unless he is deeply involved in finding his own job and unless he learns how to find the kind of job he wants and for which he is qualified, his ability to develop a satisfying and productive work career will not be improved.

Some centers, including those operated by the Bureau of Prisons, assign a trained Employment Specialist to job development, job counseling and job placement duties. He directs his efforts toward establishing working relationships with the full range of employers in a given community. Usually, these include an understanding that residents with the skills necessary will be interviewed for employment on the same basis as non-offender applicants. Seldom is there a commitment to hire until the resident has appeared for interview.

Most center residents need to be prepared for job-hunting. This includes

being taught how to conduct themselves in an interview and may include opportunity to practice interview techniques before actually making a try as an applicant. Preparation also includes an exploration and assessment of skills, interests and economic needs that will influence the type or types of employment that will be suitable. Residents can then plan their job searches on the basis of decisions they have made.

For residents with no money, a short-term day labor arrangement with a local employment service can meet immediate need for funds. Jobs of this kind seldom provide more than quick income, but they do have certain advantages that can be exploited. The staff is often able to observe the resident's job performance and ability to utilize his earnings until more suitable and permanent employment is found. The resident may even enjoy the satisfactions of paying his own way.

Counseling. The staff must initiate a process of counseling for each resident which is focused on day-by-day performance and difficulties encountered. This type of counseling clarifies and sets in perspective the day-by-day problems experienced by the resident, enables him to consider various ways of dealing with them in the future and provides some control over impulsive reactions to the stresses and frustrations which occur.

As a resident exhibits an ability or inability to function adequately in an increasing number of activities, decisions can be made as to what special resources and service agencies need to be brought in. In this connection, an important responsibility of the program manager is selection and training staff in the skills needed for this kind of counseling.

Food Service. Among the many operational concerns in managing a residential center, none occupies more time than providing food service. The most popular solution to feeding residents has been the decision to have a staff member or former offender who becomes a permanent resident prepare family style meals for all.

This has appeared to be a "good" service that enhances a sought-for "family" atmosphere and establishes a setting for interpersonal relationships.* In some instances, however, one finds residents occupy roles as servants to the staff and one is also treated to the sight of large locks on food storage closets, refrigerators and freezers. Even more damaging is the potential danger of creating or reinforcing strong and lasting dependency in the residents.

**While Bureau of Prisons' centers no longer provide food service, many still do in the firm belief that meal time provides an excellent opportunity for informal counseling to take place. In support of this belief, one center manager has commented, "We would prefer that a resident be somewhat dependent upon his arrival and taper this dependence during the weeks of his stay. Many of the people with whom we deal are without families, loner types whom we feel might even be indulged initially and allowed to be dependent...It has been our experience that those not participating in food service are more isolated from the program."*

There can be little realism in a regimen that provides bed and board for all, even for those who squander their earnings. The advisability of requiring residents to begin providing for themselves as soon as they are able has been emphasized elsewhere in this document. For many, this menas that they pay their own way beginning the day of arrival. For others, without funds and with limited earning power, some kind of economic support is necessary all through the program and thereafter. However, each resident should be required to shoulder as much of his share of the load as possible.

Controls. Establishing suitable controls in a residential center is the most subtle task of the manager and his staff. The bars, locks, counts, and constant surveillance of an institution have no place in a community center. Neither do unbridled license, irresponsible or criminal behavior in the house or in the community, or the continuation of habits which brought the resident to the attention of the police in the first place.

Personal accountability, usually achieved by the climate of the center and reinforced by close liaison with a particular member of the staff, must take the place of the physical restraints of institution life. Residents who cannot develop personal accountability must be returned to, or sent to, a more conventional correction facility.

The rules of a center should conform to the rules that govern conduct in the general society. Assistance to the resident in conforming to those rules may appropriately be offered by daily informal talks with a particular staff member. The latter should expect a full and truthful account of the day's happenings. He should not fail to express gratification at the good things, but he should not "duck" frank discussion of indications of lack of responsibility whether they are gleaned from the resident's own conversation or from other sources. Absence of complete frankness is fatal to a constructive relationship.

Some accounting for the use of the resident's time is a reasonable requirement. This may be done by having the staff counselor and the resident work out a schedule which embraces the things which must be done. Compliance with the schedule can be a fruitful basis for the daily conferences. The resident should have freedom to move about the center and the community during his unscheduled time, but there is no reason to countenance secrecy or deceit concerning leisure time activities.

Two further things need to be said about controls. First, they should be relaxed as the resident demonstrates his ability to manage his own affairs.

Second, there is no reason why special rules cannot be set up for the certain individuals without applying them to the whole group. Perhaps this comes up most often in the matter of the use of alcohol. If it has been a problem or is

becoming a problem to certain individuals, it is perfectly within the spirit of the program to apply restrictions that do not apply to other residents.

Another area of differentiation may be in the management of money. All residents should be required to establish and maintain a savings account, but the amount of cash allowed for out-of-pocket spending may differ for different individuals according to their spending proclivities or their financial responsibilities to others.

In the last analysis, control in a residential center depends upon common sense and the cultivation of interpersonal relations.

Records and Reports. The manager of a community center program has responsibility to furnish essentially two kinds of information: (a) management information to sponsoring agencies and (b) offender information to correctional agencies involved.

In accordance with policy or statutory requirements, center managers should prepare monthly or quarterly summaries conveying basic program statistics and narrative observations of the performance of both staff members and residents. Indications of the acceptance of the center in the community, operating problems, program innovations and observable effects on other correctional programs are highly useful items of information.

This kind of information is equally useful to correctional administrators who have responsibility for increasing the effectiveness of the correctional system. In addition, they need basic facts relating to the selection of center residents and how they function in the community. Standard data on earnings and payments should be maintained. Termination reports should be prepared in all cases showing the reasons for removal from the program, with explanations for removals for cause. Ideally, individual case records will evaluate the progress made by residents and will assess the relevance of this to original diagnostic findings, the correctional goals that were set and the elements of release planning needed.

Program Evaluation. There is also an important need to evaluate continually and fully all aspects of center operation. This is more than a matter of learning by doing during early developmental stages. Wherever a center program exists for significant numbers of offenders, its impact is felt in all areas of the correctional system—probation, institutions, and parole. All correctional officials must be alert to this, they must assess its meaning and plan continuing adjustments that will insure a balanced and increasingly effective total correctional program. Feedback of information to participating correctional agencies of actual community experience will provide a basis for intelligent re-programming.

In preceeding sections, much has been said about goals for the offender and the kinds of assistance residential centers can provide in attaining them. Goals should be set for the operation of the centers, themselves. These will provide guides for evaluation of the effectiveness of centers as correctional resources. Where possible, goals should be expressed in quantifiable terms. For example, a goal might be to increase a center's capabilitites of handling a larger number of offenders presenting a broader range of individual problems and needs. Whatever the choice of approaches, results achieved could be expressed in numbers, types of offenders and time. Another goal might be to increase a center's efficiency in getting residents through the program. The achievement of this can be expressed in numbers, time and dollars.

Increasing the correctional benefits of the program is a more complex problem, not only because results cannot be quantified so readily but because it is not easy to arrive at acceptable definitions of the benefits desired. One immediate expectation of all correctional effort is reduction of recidivism, but what constitutes recidivism and what measures can be applied to specific correctional programs and services that may have contributed to it? Better that a center limit its claim to reducing the rate of parole failure of former center residents, as compared to parolees who had not been exposed to center programming. While this might be a fairly definite evaluation of center effectiveness, it would not be complete because not all center residents are candidates for parole (depending upon intake policy). There still would be missing an identification of what, if anything in the center programming of the offender, accounted for the success.

There is a tendency in all of corrections to aspire to more than can be reliably measured or rightfully claimed. At the present state of the art, there are too many unknowns. But results that are known and can be measured often are overlooked. What, for example, are the dollar returns which result from a center resident's becoming self-supporting for at least the duration of his stay at the center, contributing to the support of dependents, partially defraying the costs of his keep, paying taxes like other people and saving enough to insure financial security for a start in the community when he is released?

THE FUTURE OF COMMUNITY CENTERS

There are several hundred community residential centers in the United States today which provide various services to offenders. Many agencies and organizations have found the capabilities of mounting needed programs and of managing them successfully. That the numbers of such programs and facilities will continue to multiply and that program managers will continually strive to improve operational efficiency is certain. This pamphlet is intended to promote

these accomplishments. It is to be hoped that the prevalent and very limited view of corrections which relies so heavily on institutionalization will be modified further to permit more widespread use of community residential centers.

Current experience suggests the need for continuing experimentation in the management of community centers. While there are many administrative patterns today, there are others that should be attempted. In one large correctional agency, planners have advanced a proposal to operate several center units in a single metropolitan area. Under central local direction, the operating units would be distributed geographically. The rationale of this proposal includes increasing service capacity, reduction of per capita costs by centralizing administrative and management direction and permitting program specialization among the operating units. It has even been suggested that a residential center might be operated successfully as a small private business enterprise.

There is a continuing basic need for knowledge with which to train staff and offenders in the specific behaviors which are required to master the specific tasks for successful community adjustment. Research of residential center programs would contribute much to this knowledge and, at the same time, enable more sophisticated development of the program itself. For example, more must be learned about the types of residents who can make most and least effective use of residential center experience. Complex questions can be raised about the character of center experience for the offenders involved. There is evidence, too, of a need to study the appropriate "dosage" of community experience for differing types of offenders.

It is a certainty that community residential centers in themselves and with or without other program innovations will solve only a few of the many problems besetting corrections. Long-range planning and coordinated effort will be needed, together with the kinds of resources which will produce better understanding of the entire correctional process and enable close study of whatever steps are taken to improve the system.

The real hope for greater program effectiveness lies in systems planning. Whatever the worth of individual programs and services, their ultimate effectiveness will be measured as contributions to the vaule of the system in which they exist. There are encouraging signs that this concept is becoming more than a vision.

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